

0-10-1-99
10-1-99
10-1-99

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>[Signature]</i>	<i>[Signature]</i>	<i>9/24/89</i>
O.I.P.E. CLASSIFIER	<i>[Signature]</i>	<i>48</i>	<i>9/28/89</i>
FORMALITY REVIEW	<i>[Signature]</i>	<i>#07033</i>	<i>9-29-91</i>

INDEX OF CLAIMS

✓ Rejected N Non-elected
= Allowed I Interference
- (Through numeral)... Canceled A Appeal
+ Restricted O Objected

Claim	Final	Original	Date
1	✓	✓	✓
2	✓	✓	✓
3	✓	✓	✓
4	✓	✓	✓
5	✓	✓	✓
6	✓	✓	✓
7	✓	✓	✓
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50	✓	✓	✓

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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